

MIED (Rev.5/13) General Civil Complaint

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN

69

FILED  
MAY 13 2015

CLERK'S OFFICE  
U.S. DISTRICT COURT

MARGARET A. ROBISON

Plaintiff(s),

v.

WIXOM GRAND RIVER  
ASSOCIATES L.P.

Case: 2:15-cv-11725  
Judge: Cohn, Avern  
MJ: Patti, Anthony P.  
Filed: 05-13-2015 At 01:29 PM  
CMP Robison v Wixom Grand River Ass  
ociates L.P.(SCB)

Defendant(s).

COMPLAINT

- I. Defendant(s). Print the full name for each defendant. If there are more defendants, use additional pages to provide their names.

Name of Defendant(s)

1.

2.

3.

4.

5.

- II. Statement of claim. Briefly state the facts of your case. Describe how each defendant is involved, and exactly what each defendant did, or failed to do. Include names of any other persons involved, dates, and places. You may use additional paper if necessary.

Please see attachments

MED (Rev.5/13) General Civil Complaint

III. **Relief.** Briefly state exactly what you want the court to do for you.

Award damages in excess of \$10,000 for the  
violations specified in the Complaint.

MIED (Rev.5/13) General Civil Complaint

IV. Additional Information. -- Briefly enter any additional information, you may use additional paper.

V. Demand for Jury Trial. Check this box if you want your case to be decided by a jury, instead of a judge.

☒ Plaintiff demands a jury trial on all issues.

Dated: May 11, 2015

Margaret A. Robinson  
Plaintiff's Signature

MARGARET A. ROBINSON  
Plaintiff's Printed Name

27084 MEADOWS DR #203  
Street Address

WYOMING 48303  
City, State, Zip Code

248 773-7790 Home  
Telephone Number

MARG2253@aol.com  
E-mail Address

PURSUANT TO LOCAL RULE 83.11

1. Is this a case that has been previously dismissed?

☐ Yes

☒ No

If yes, give the following information:

Court: \_\_\_\_\_

Case No.: \_\_\_\_\_

Judge: \_\_\_\_\_

2. Other than stated above, are there any pending or previously discontinued or dismissed companion cases in this or any other court, including state court? (Companion cases are matters in which it appears substantially similar evidence will be offered or the same or related parties are present and the cases arise out of the same transaction or occurrence.)

☐ Yes

☒ No

If yes, give the following information:

Court: \_\_\_\_\_

Case No.: \_\_\_\_\_

Judge: \_\_\_\_\_

Notes :

\_\_\_\_\_

\_\_\_\_\_

**Exhibit A**

Letter from Representative Klint Kesto, November 6, 2014.

Picture of tenant's car parked in my space November 15, 2013

Letter from Lachrisha Howes tenant 27084-103 witness to situation, September 14, 2014.

Men on the Move blocking and using my space for delivery September 7, 2013 call to police, and email to the company.

March 12, 2013 1:30 p.m., blocking my space for a delivery.

February 28, 2013 North American Van Lines parked in my space, company was notified.



39TH DISTRICT  
STATE CAPITOL  
PO BOX 30014  
LANSING, MI 48909-7514  
PHONE: (517) 373-1739  
FAX: (517) 373-8361  
E-MAIL: klintkesto@house.mi.gov

MICHIGAN HOUSE OF REPRESENTATIVES

**KLINT KESTO**  
STATE REPRESENTATIVE

November 6, 2014

Dear Marge,

I am sincerely sorry for the way that you have been treated in the Meadowood Park Apartments. I personally called Dennis from the City of Wixom Building Department to discuss this matter. It is my opinion that filing a complaint in the U.S. District Courts against Meadowood Park Apartments is the next right step in this matter. Failing to provide the handicapped spaces is unacceptable and there needs to be a zero- tolerance of abuse towards the handicapped. I hope this letter will help you in resolving this matter.

Sincerely,

A handwritten signature in cursive script that reads "Klint Kesto".

State Representative Klint Kesto



May 15, 2013  
9:30 pm

September 24, 2014

To Whom It May Concern:

November, 2013, I came home in the evening to witness, Margaret Robison waiting for the maintenance man, George Moses, to come and get a tenant parked out of her "reserved" parking space. George did state, "You need to play nice with the new neighbor."

I also been harassed with my handicapped parking "reserved" spot. George Moses also had to come out at night to get a person out of my "reserved" parking spot. He even stated to me, "Can't you park in another spot?" No maintenance personnel should not be in charge of handicapped parking. The police should have been involved but because it was not a "handicapped" parking spot they could not interfere. It was a conflict of interest because some residents who had handicapped parking, also worked in the office. George Moses is still employed at Meadowood Park Apartments (new owner).

I also was forced to turn over my medical records to the landlord in order to get a handicapped parking spot. I believe that myself, and Margaret Robison were the only two residents that had to comply to their requests. Since then, I have moved out of the complex.

When I moved in I also requested to have handicapped parking. I asked for a "handicapped for resident only" with a permit number on it, and was told, "that sign is against the law." Upon research, there is no such law. I also was told that I would have to pay \$250.00 to have it. I believe that no handicapped person should have to pay for parking when it should have been already been to code. It was not fair that other handicapped tenants did not have to pay for their handicapped parking.

If you need any further information, please feel free to contact me at 248-378-0468.

Lachrisha Howes

A handwritten signature in cursive script that reads "Lachrisha Howes". The signature is written in dark ink and is positioned below the printed name.







Wayne County (734) 729-MOVE  
Oakland County (248) 354-2525

Down River (313) 292-MOVE  
Ann Arbor (734) 913-9966

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Testimonials  
Our Services  
Locations

Contact Us

Like

Send

276 people like this. Be the first of your friends.

Do you have any questions or concerns? We would love to hear from you! Please fill out this form and we will get in touch with you shortly.

There was a problem with your submission. Errors have been highlighted below.

**Name \***

Marge

Robison

First

Last

**Phone \***

248-773-7790

**Email \***

mar62253@aol.com

**Address**

27084 Meadowood Drive #203

Street Address

Wixom

MI

City

State / Province / Region

48393

ZIP / Postal Code

**Questions or Concerns**

Get Balance

Get Data Used

Get Minutes Used

## Summary for Margaret a Robison: 734-634-7887

## Get Plan

## Nationwide Talk 450

\$39.99 monthly charge

450 monthly allowance minutes

\$.45 per minute after allowance

## Pay As You Use Megabyte Data

\$1.99 per megabyte

## Beginning on 03/10/13:

25 Bonus Minutes Available for Use Within 1 Year

25 remaining

## M2M National Unlimited

Unlimited monthly Mobile to Mobile

## UNL Night &amp; Weekend Min

Unlimited monthly OFFPEAK

## 250 Message Allowance

\$5.00 monthly charge

250 monthly message allowance

\$.10 per message after allowance

Have more questions about your charges?  
Get details for usage charges at  
[www.verizonwireless.com](http://www.verizonwireless.com). Sign into my  
Verizon to View Online Bill and click on  
Calls, Messages & Data.

## Monthly Charges

Nationwide Talk 450	10/07 - 11/06	39.99
250 Message Allowance	10/07 - 11/06	5.00
		<b>\$44.99</b>

## Usage and Purchase Charges

Voice	Allowance	Used	Billable	Cost
Calling Plan	minutes 450	63	---	---
Mobile to Mobile	minutes unlimited	7	---	---
Night/Weekend	minutes unlimited	28	---	---
411 Search	calls ---	2	2	3.98
Total Voice				<b>\$3.98</b>

## Messaging

Text, Picture & Video	messages 250	100	---	---
Total Messaging				<b>\$0.00</b>

## Total Usage and Purchase Charges

**\$3.98**

## Verizon Wireless' Surcharges

Fed Universal Service Charge	1.67
Regulatory Charge	.21
Administrative Charge	.90
Intrast Switched Toll Acc Sur	.11
	<b>\$2.89</b>

## Taxes, Governmental Surcharges and Fees

MI State 911 Charge	.19
Oakland Cnty 911 Charge	.20
MI State Use Tax	3.10
	<b>\$3.49</b>

## Total Current Charges for 734-634-7887

**\$55.35**

## Detail for Margaret a Robison: 734-634-7887

Date	Time	Number	Rate	Usage Type	Origination	Destination	Min.	Airtime Charges	Long Dist/ Other Chgs	Total
9/07	3:12P	248-624-6114	Off-Peak	N&W <i>Wixom Police</i>	Novi MI	Walledlake MI	2	---	---	---
9/07	3:15P	248-624-6114	Off-Peak	N&W <i>Wixom Police</i>	Wixom MI	Walledlake MI	3	---	---	---
9/07	7:31P	219-617-2673	Off-Peak	N&W	Novi MI	Incoming CL	1	---	---	---
9/09	5:58P	248-348-0846	Peak	PlanAllow	Wixom MI	Incoming CL	1	---	---	---
9/10	8:00A	812-626-0412	Peak	PlanAllow	Novi MI	McUtcharvi IN	2	---	---	---
9/12	9:16A	734-459-9374	Peak	PlanAllow	Northville MI	Plymouth MI	1	---	---	---
9/12	10:40A	000-000-0086	Peak	PlanAllow, CallVM	Northville MI	Voice Mail CL	1	---	---	---
9/12	1:38P	734-459-1575	Peak	PlanAllow	Northville MI	Incoming CL	1	---	---	---
9/12	5:26P	248-349-6546	Peak	PlanAllow	Wixom MI	Incoming CL	6	---	---	---
9/13	12:05P	248-476-7775	Peak	PlanAllow	Livonia MI	Farmington MI	2	---	---	---

Control #: 10043735-00147843

Order #: 4606 Copy #: 10

Today September 7, 2013 at 3:35p.m. I came home to my apartment and your moving truck was parked in my reserved space. These reserved spaces are for handicapped people. I asked them to move their truck and they said "no, can't you wait." I said no that this space is for the handicapped. He was mad that I asked him to move the truck. I went to the office and got the girl that works in the office and she said to call the police. I told her she needs to come over and make them move. I was on the phone with the police when they finally backed up their truck to an empty space. Then they started with their talk about the reason the people were moving out was because of me and the one started to point his finger at me. The complex had a problem with these tenants when they moved in because North American Van Lines also parked in my reserved spot. One of the men said go ahead and call the police because it will take them to long to come to complex and then he would be gone (that was the older guy). The younger men started saying where's my husband? why don't you have one? Then when I was walking into my apartment and started to close the door,

#### Captcha



The reCAPTCHA wasn't entered correctly. Go back and try it again.

Submit

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Today September 7, 2013 at 3:35p.m. I came home to my apartment and your moving truck was parked in my reserved space. These reserved spaces are for handicapped people. I asked them to move their truck and they said "no, can't you wait." I said no that this space is for the handicapped. He was mad that I asked him to move the truck. I went to the office and got the girl that works in the office and she said to call the police. I told her she needs to come over and make them move. I was on the phone with the police when they finally backed up their truck to an empty space. Then they started with their talk about the reason the people were moving out was because of me and the one started to point his finger at me. The complex had a problem with these tenants when they moved in because North American Van Lines also parked in my reserved spot. One of the men said go ahead and call the police because it will take them a long time to come to complex and then he would be gone (that was the older guy). The younger men started saying where's my husband? why don't you have one? Then when I was walking into my apartment and started to close the door,

Captcha



atalope

Captcha

Please Read Terms



The reCAPTCHA wasn't entered correctly. Go back and try it again.

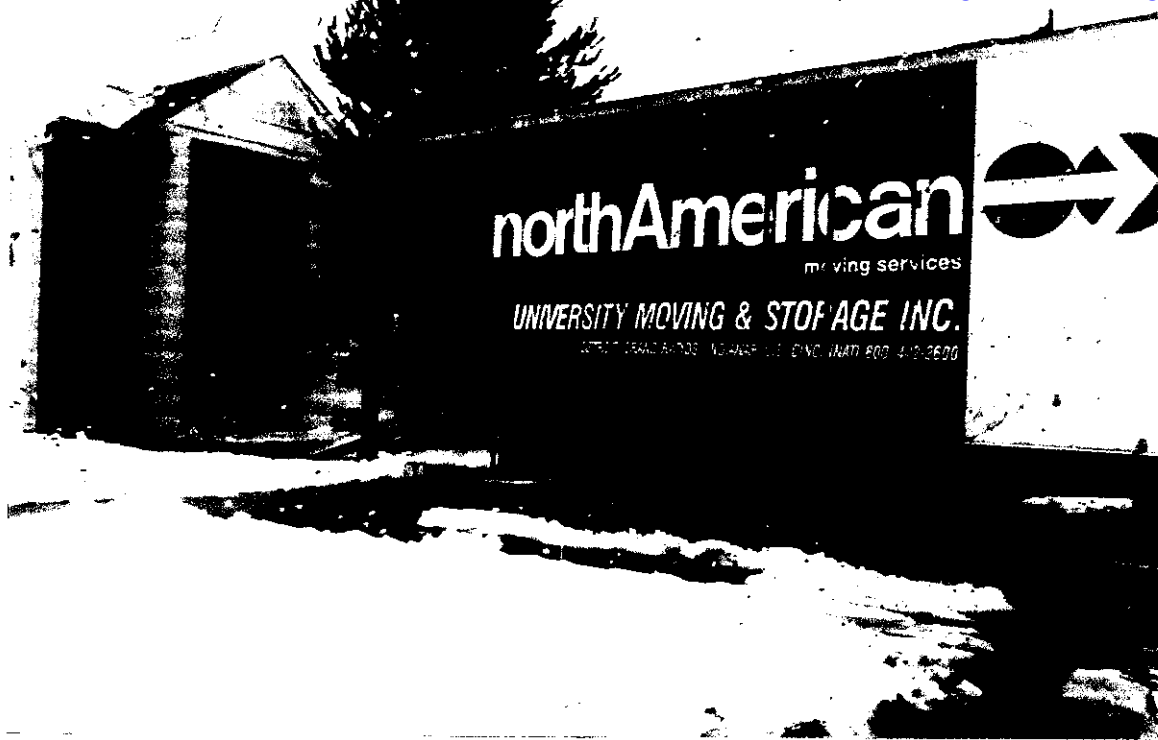
Submit

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Don't let the door hit you in the ass.  
I am 40 year old Disabled woman  
& no one should talk to me like this  
I filed them & currently have a  
complaint w/ the U.S. Attorney General  
& the older man said. I have been  
doing this for a long time & I know  
the U.S. Marshalls & that I was wrong.  
His tenants that they are moving out  
was 37634111 W Dr #204 Wren @ Midway.  
The black man said he couldn't move the truck  
where there was grass growing, he would get his  
free use.



3/10/2015 1:24pm



2/28/2013

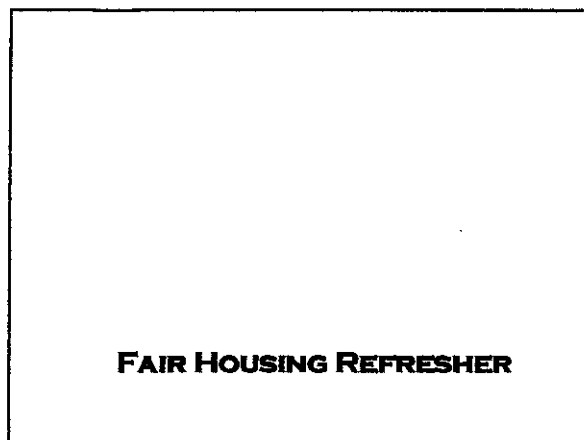
**Exhibit B**

Fair Housing Manual dated November 8<sup>th</sup>, 9<sup>th</sup> 2010

Letter from Kathy Zeisloft stating tax credits, wanted tenant to walk 30 ft. past her entrance and use that parking space, and pay to have a ramp curb cut-out.



## Fair Housing Training - Michigan



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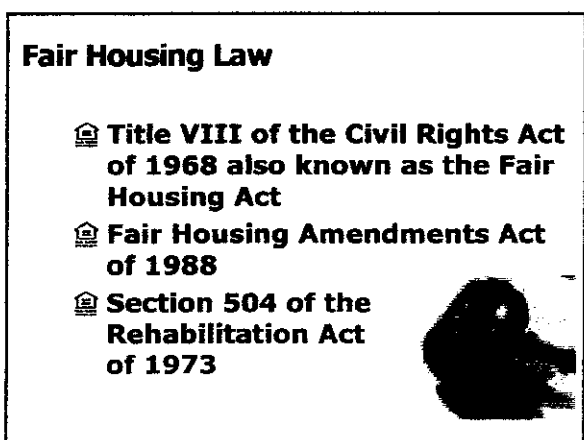
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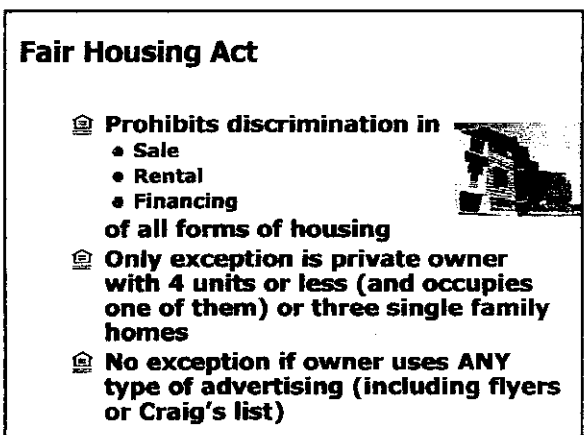
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## Fair Housing Training - Michigan

### Fair Housing Amendments Act

- 🏠 **Effective 3/12/89**
- 🏠 **Added two protected classes**
- 🏠 **Allows greater enforcement**
- 🏠 **Contains construction and design provisions**
- 🏠 **Provides for reasonable**
  - **Modifications**
  - **Accommodations**




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### Fair Housing Poster & Logo

U.S. Department of Housing and Urban Development



**We Are Dedicated to Accomplishing With the Federal Fair Housing Law**  
(The National Housing Act of 1968)

**It is illegal to discriminate against any person because of Race, Color, Religion, Sex, Handicap, Familial Status, or National Origin**

<input type="checkbox"/> In the sale or rental of housing or residential facilities	<input type="checkbox"/> In the provision of real estate brokerage services
<input type="checkbox"/> In advertising for sale or rental of housing	<input type="checkbox"/> In the appraisal of housing
<input type="checkbox"/> In the financing of housing	<input type="checkbox"/> Blockbusting, i.e., to "steer"

**Poster must be prominently displayed in Leasing office**

**English & Spanish (other languages available if needed)**

**Logo must be on ALL advertising, flyers, etc.**

Information regarding the Fair Housing Act is available from the U.S. Department of Housing and Urban Development, 400 Michigan Avenue, N.E., Washington, D.C. 20001. Telephone: (202) 455-6111.

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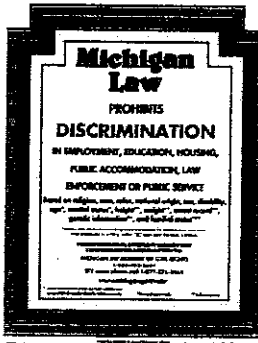
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### Michigan additional protections

- 🏠 **Housing**
  - **Marital Status**
  - **Age**
- 🏠 **Employment only**
  - **Arrest record**
  - **Height**
  - **Weight**
  - **Genetic info**
- 🏠 **Must display BOTH posters**




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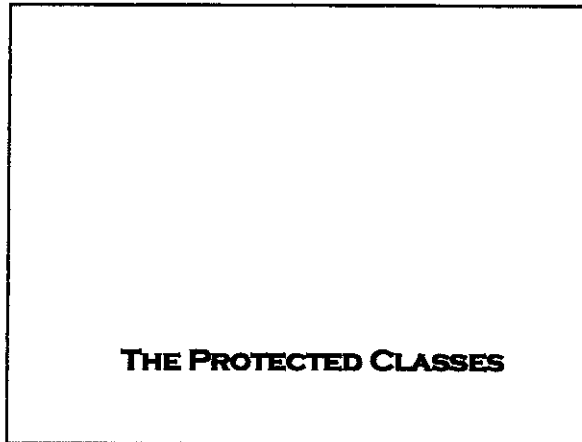
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## Fair Housing Training - Michigan



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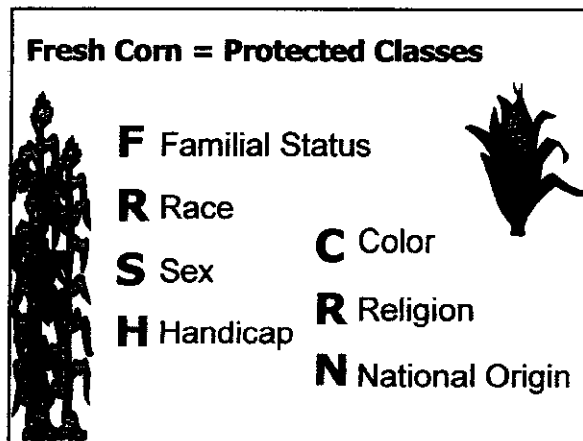
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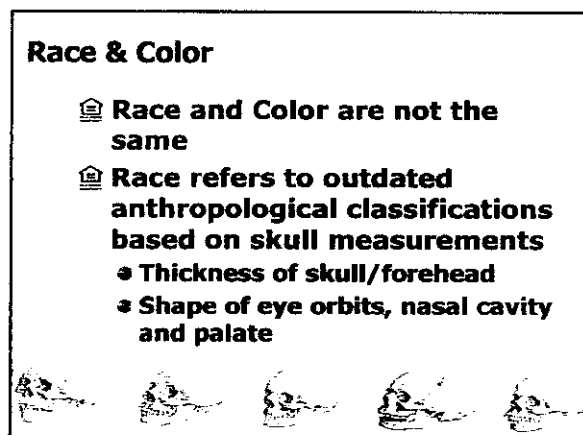
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## Fair Housing Training - Michigan

### Race/Color



- 🏠 All humans share 99.9% of the same DNA
- 🏠 We share 97.5% with a mouse and 50% with a banana
- 🏠 Recent case - AIMCO paid \$2.13M to settle suit

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### HUD's Race Categories

- 🏠 American Indian or Alaskan Native
  - Descendants of original peoples of North, Central or South America
  - Must maintain tribal affiliation/cultural attachment
- 🏠 Asian
  - Descendants of original peoples of Far East or Southeast Asia or India
- 🏠 Black or African American
  - Descendants of any of the black racial groups of Africa
- 🏠 Native Hawaiian or Pacific Islander
  - Descendants of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- 🏠 White
  - Descendants of the original peoples of Europe, the Middle East or North Africa

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### Ethnicity

- 🏠 Hispanic is not a "race" but considered to be an "ethnicity" by HUD
- 🏠 A person can be ANY race and also be Hispanic
  - HUD Definition: A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.
- 🏠 Choices are "Hispanic" or "Not Hispanic"
- 🏠 Oddly, Hispanics can file fair housing complaints using race or national origin

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## Fair Housing Training - Michigan

**CONCORD**  
MANAGEMENT LIMITED

Community: \_\_\_\_\_

**Race/Ethnicity/Disability Self-Identification Form**  
(3 separate forms to be completed for each household member)

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Our special financing requires us to provide demographic information about our Residents to the agencies and organizations providing our funding. Please take a moment to complete this form to help us gather accurate information. Providing such information is voluntary. The information gathered is used for statistical purposes only. Parents or guardians are to complete the form for children under the age of 18.

There is no penalty for refusing to provide this information.

☐ My (or my child's) race/ethnicity/disability data is provided below.

☐ I do not wish to provide my (or my child's) race/ethnicity/disability data.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**RACE INFORMATION**

*NOTE: All race and ethnicity definitions below are copied directly from the Department of Housing and Urban Development form HUD-7766-01. Please check each box that applies to you.*

☐ **American Indian or Alaskan Native**  
A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

☐ **Asian**  
A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

☐ **Native Hawaiian or Other Pacific Islander**  
A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

☐ **Black or African American**  
A person having origins in any of the black racial groups of Africa. Terms such as "Negro" or "Nigger" can be used in addition to "Black" or "African American."

☐ **White or Caucasian**  
A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

**ETHNICITY / HISPANIC ORIGIN**

Hispanic Origin includes a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."

Are you of Hispanic or Latino Origin? ☐ Yes ☐ No

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**DISABILITY STATUS**

The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance to most people's daily lives, such as seeing, hearing, speaking, walking, breathing, working, learning, or caring for oneself.

☐ I consider myself to be disabled as defined above.

☐ I do not consider myself to be disabled as defined above.

☐ I don't know.

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## Fair Housing Training - Michigan

### Color

- 🏠 Refers only to pigmentation, complexion, skin color or tone
- 🏠 Not the same as race, but some race/color characteristics overlap
- 🏠 People of the same race can have different color
  - Color discrimination can occur among persons of the same race and/or national origin
  - Fair housing complaints often filed as both race and color since it is difficult to differentiate




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### Religion

- 🏠 All religions protected
  - Recognized religions
  - Cults
  - Atheists/Agnostics
- 🏠 Can allow religious studies in clubhouse, but must be available to everyone
- 🏠 Beliefs are protected, but we are NOT required to accommodate religion or religious practices
- 🏠 Most recent case – insurance company offering preferential rates and coverage to Christians




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### National Origin

- 🏠 Country of origin of
  - Applicant/Resident, or
  - Applicant/Resident's ancestors
- 🏠 May or may not be tied to race
- 🏠 Persons from the same country sometimes discriminate against one another
- 🏠 Donald Sterling case – \$2.725 Million settlement (also race and familial status)




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## Fair Housing Training - Michigan

### Sex & Sexual Harassment

- 🏠 Protects gender discrimination, including sexual harassment
- 🏠 Proposed rule never finalized; guidance issued 11/17/08
- 🏠 Two types
  - Quid Pro Quo
  - Hostile Environment
- 🏠 Covers
  - Direct harassment
  - Employees
  - Vendors
  - Other Residents



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### Familial Status

- 🏠 Protects households with minor children
- 🏠 Includes unborn children
- 🏠 Does not have to be "family"
  - Foster children
  - Adoption or adoption process
  - Guardianship
- 🏠 Exception – elderly housing



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### Familial Status - Occupancy

- 🏠 Cannot limit number of children in unit
- 🏠 CAN limit number of adults
- 🏠 Example: No more than 6 persons in a two-bedroom apartment, with no more than 2 adults



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## Fair Housing Training - Michigan

### Terms & Conditions

- 🏠 **Rules must target behavior, not children**
  - DON'T say "Children may not ride skateboards in the breezeway"
  - DO say "No one can ride skateboards in the breezeway"
- 🏠 **Concord has a Resident Handbook**
  - No additional rules and regs allowed
  - Contact Corporate if you think a rule should be added, changed or removed.
- 🏠 **Rules to limit access to amenities must be based on safety – Dept. of Justice says children 13 and older should be able to use amenities unsupervised**

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### Elderly Housing

- 🏠 **Elderly properties exempt from familial status (unless subsidized)**
- 🏠 **Two Definitions**
  - 62 and over - Every person must be 62 or older
  - 55 or over - At least 80% of households must have one person 55 or older
- 🏠 **If violate rule, will lose elderly designation**



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**HUD'S STATE OF FAIR HOUSING  
REPORT**

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## Fair Housing Training - Michigan

### The State of Fair Housing

- 🏠 HUD advocates adding two new protected classes:
  - Lesbian, Gay, Bisexual and Transgender (LGBT) individuals
  - "Legal source of income" (i.e. Section 8 vouchers).
- 🏠 This initiative has been in the works for a number of years and appears to have support from the current administration as well as the National Fair Housing Alliance.
- 🏠 If added, conventional properties would be required to accept Section 8 vouchers if the property rents meet the payment standards.

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### The State of Fair Housing

- 🏠 Complaints were down from 10,552 in FY08 to 10,242 in FY2009
- 🏠 For the second year in a row, disability was the most frequently reported type of discrimination (44%)
- 🏠 Race complaints declining, familial status complaints increasing
- 🏠 In FY 08
  - 35% of complaints were race related
  - 16% were familial status
- 🏠 In FY09
  - 31% of all complaints were based on race
  - 20% were based on familial status.

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### The State of Fair Housing

- 🏠 Of the 10,694 complaints closed in FY2009,
  - 47% were no cause determinations
  - 16% were administrative closes (complainant withdraws, does not cooperate or cannot be located)
  - 31% were conciliated/settled and
  - only 6% resulted in a reasonable cause determination.
  - Less than 0.5% were referred to the Department of Justice for enforcement.

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## Fair Housing Training - Michigan

### The State of Fair Housing

#### Types of complaints

- 55% of fair housing complaints alleged "discriminatory terms, conditions privileges, service and facilities in the rental or sale of property".
- 24% of all fair housing complaints alleged "refusal to rent"
- 24% alleged failure to allow a reasonable accommodation or modification.

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### The State of Fair Housing

#### HUD distributed \$26,300,000 to Fair Housing Initiatives Programs (FHIPs)

- #### Usually private, non-profit organizations that receive funding from HUD to assist persons who believe they have suffered discrimination, conduct testing and conduct training.

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### Recent Cases

#### AIMCO – \$2.13m settlement for race complaint

#### Manager

- Displayed "racially hostile materials" (including hangman's noose)
- Used racial epithets
- Fired Resident Service Coordinator for cooperating with investigation

#### Second largest monetary payment ever obtained by DOJ in a rental fair housing case

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## Fair Housing Training - Michigan

### Recent Cases

🏠 **Fountain View Apartments, Orange City, FL - \$415,000 settlement (\$100k is civil penalty)**

🏠 **Race & Familial Status**

- African American woman inquired about availability, told no vacancy
- Given application, but not allowed to submit – "ADULTS ONLY" in area for children's names
- She had a friend call the next day, plenty of apartments available
- Contacted news media, they "tested"

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### Recent Cases

🏠 **Cornerstone – Familial Status**

🏠 **Had one person per bedroom policy; provided written policy to residents**

🏠 **Settled after FIVE years**

- Two person per bedroom policy implemented
- Monitoring, training, testing
- Monetary relief not disclosed

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**WORKING WITH DISABILITIES**

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## Fair Housing Training - Michigan

### The Law

- 🏠 We cannot discriminate against persons with disabilities
  - Terms and conditions
  - Location of apartment
- 🏠 And must also "level the playing field" by allowing reasonable accommodations & reasonable modifications,
- 🏠 SO . . . . .

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**Treat everyone  
the same . . .  
*until you're not  
supposed to!!!***

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### Disability Defined

- 🏠 Physical or mental impairment which substantially limits one or more major life functions
- 🏠 History of impairment
- 🏠 Regarded as having an impairment
- 🏠 May be resident or resident's friends or family



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## Fair Housing Training - Michigan

### Disability Defined



- 🏠 Recovering drug addicts protected
- 🏠 Current users are not
- 🏠 Property does not have to accommodate disabled persons if doing so will endanger other residents
- 🏠 Receipt of Disability benefits does not necessarily mean person is disabled

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### Reasonable Accommodations

- 🏠 Accommodation – change in management policies or procedures – service animals, parking, rent payment
- 🏠 Property is *always* responsible for any cost associated with an accommodation



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### Service Animals

- 🏠 Service animals – trained to perform a specific task
  - Dogs for visually impaired
  - Monkeys, horses, dogs to help with stability and mobility issues
  - Usually for physical disabilities
- 🏠 Cannot restrict type of animal



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## air Housing Training - Michigan

### Companion Animals

#### 🏠 Companion animals – not trained

- Provide comfort
- Usually for mental or emotional impairment
- Usually verify need

#### 🏠 Sometimes called therapy or emotional support animals

#### 🏠 Concord calls all these animals "Service Animals"




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### Service/Companion Animals

#### 🏠 Law makes no distinction between the two types of animals

#### 🏠 We can NOT require an animal to be trained

#### 🏠 CAN verify disability and NEED for animal

#### 🏠 ALWAYS use Service/Companion Animal Addendum, not Pet Addendum

#### 🏠 Accommodation may be number of animals, weight, or simply allowing animal




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### New Service Animal Addendum

#### 🏠 Clearly note approved Service Animals in the file

#### 🏠 Never refer to a Service Animal as a "Pet"

#### 🏠 Essentially the same as Pet Addendum, but documents what policy was changed for disability

#### 🏠 Resident still responsible for animal

#### 🏠 Approval for animal CAN be revoked if agreement not met – contact Senior Analyst if there are problems with the animal

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## Fair Housing Training - Michigan

**SPECIAL SERVICE/COMPANION ANIMAL RESPONSIBILITY ADDENDUM**

SPECIAL SERVICE/COMPANION ANIMAL RESPONSIBILITY CLAUSE ADDENDUM TO THE LEASE AGREEMENT is made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, for the following described premises in the County of \_\_\_\_\_, State of \_\_\_\_\_, known as \_\_\_\_\_ (the Leased Premises).

RESIDENT has requested a reasonable accommodation to the following policy (check one):

☐ Community does not allow pets and RESIDENT has requested that he/she be allowed to keep a Service Animal(s) as he/she is disabled due to a disability.

☐ Community allows pets and RESIDENT has requested that the pet policy be modified for he/her Service Animal(s) due to a disability as follows:

☐ Waive pet deposits, fees and pet rent

☐ Waive animal care restrictions

☐ Waive limit on number of animals

☐ Other \_\_\_\_\_

All documentation regarding the requested accommodation, necessary verification and approval of the request are attached.

IT IS HEREBY AGREED BY AND BETWEEN RESIDENT(S) AND CONSUMER MANAGEMENT LTD THAT Consumer Management Ltd. has approved the requested reasonable accommodation to Resident's disability and will allow Resident(s) to have the following described Service/Companion Animal(s) and no other Service/Companion Animal(s) or pet(s), in the Leased Premises upon and subject to the terms and conditions of this Lease Agreement and this Addendum, and the Resident(s) agree to comply therewith.

DESCRIPTION OF SERVICE/COMPANION ANIMAL(S) WITH PHOTOGRAPH(S)

Color \_\_\_\_\_

Weight \_\_\_\_\_

Breed \_\_\_\_\_

Name \_\_\_\_\_

Resident(s) hereby acknowledges that an inaccurate description(s) of the Service Animal(s) shall cause revocation of this consent.

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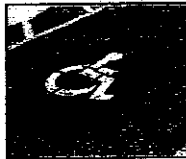
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**Parking spaces**

- 🏠 **Difference between "reserved" and "handicapped" parking**
  - Accessible (Handicapped) has loading bay and will allow ANYONE with a permit to use the space
  - Reserved is simply a regular space that is reserved for a particular resident
  - Can create a reserved space with loading bay if needed.
- 🏠 **Determine what the resident *really* needs**




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**Specs for Accessible Spaces**

- 🏠 **Required – 2% of the number of apts (state/local code may require more)**
- 🏠 **Width – 156 inches (13 feet)**
  - Loading bay/aisle – 60 to 96 inches (preferred), located on either side
  - Parking space – 96 inches
- 🏠 **Sign – 12" x 18", mounted with bottom edge at 60" above ground**
- 🏠 **Sign style – be consistent with other signs on property**
- 🏠 **May be a "modification"**




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## Fair Housing Training - Michigan

### Specs for "Reserved" Spaces

- 🏠 Regular size space (unless Resident has requested a reserved accessible space)
- 🏠 Sign
  - 12" x 18"
  - Bottom of sign mounted at 60"
- 🏠 No accessible symbol or loading bay
- 🏠 Towing of cars for reserved spaces is a maintenance emergency, but a call to towing company is all that is required




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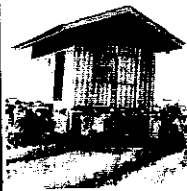
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### Transfers Due to Disability



- 🏠 If household income qualifies, allow transfer
  - If in the same building, notify Compliance but new paperwork is not necessary
  - If to a different building
    - Notify Compliance
    - Submit new paperwork to File Review for Approval
    - Don't transfer without approval

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### Transfers Due to Disability

- 🏠 If household does NOT income qualify
  - Contact Compliance
  - We can request an exemption for the transfer from MSHDA
  - DO NOT allow the transfer until it is approved by Compliance




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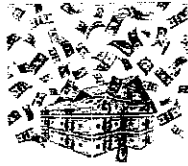
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## Fair Housing Training - Michigan

### Other Accommodations

#### 🏠 Common requests

- Late rent payment
- Trash service
- Unit transfers
- Communications



#### 🏠 These common requests are never considered unreasonable

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### Reasonable Modifications

- 🏠 Modification – physical change to apartment or common area – grab bars, ramps, smoke detectors
- 🏠 In most cases, resident bears the cost of modifications
- 🏠 May also be required to return unit to original condition
- 🏠 Possible escrow account

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### Modifications

#### 🏠 Grab bars

- Service Team can NOT install
- Have Resident get contractor
- We reimburse up to \$250
- Bars belong to resident, they should take the bar with them at move-out
- Can use designer bars!

#### 🏠 Strobe smoke detectors

#### 🏠 Ramps & threshold adjustments

#### 🏠 IF property does not meet Fair Housing design requirements, WE PAY for modification

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## Fair Housing Training - Michigan

### Forms & Policy

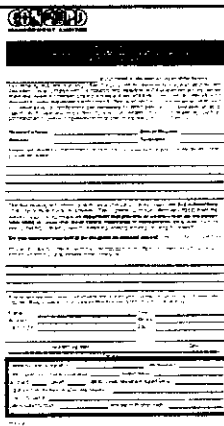
- 🏠 **New policy – all requests must be submitted to the Senior Analyst for approval**
- 🏠 **See Ops Manual Sections 215**
  - Request form
  - Verification Form
- 🏠 **Section 515: Pets & Assistive Animals**
  - New Service Animal Addendum
  - DO NOT use Pet Addendum for Service Animals
- 🏠 **Senior Analyst will respond within 72 hours**

### Handling Requests

- 🏠 **Never offer accommodation or modification – wait to be asked**
- 🏠 **When request made, ask Resident to complete the request form**
- 🏠 **Don't ask the nature or severity of the disability**
- 🏠 **Don't question the resident or make comments to others in the office**

### Request Form & Policy

- 🏠 **Effective 2/19/10**
- 🏠 **More detailed form**
- 🏠 **Replaces ALL other forms, including service animal form**
- 🏠 **Please ask Resident to be as specific as possible**

A sample of a request form. At the top, there is a 'RECEIVED' stamp. Below it, the form has several sections with headings like 'Request for Accommodation', 'Request for Modification', and 'Request for Service Animal'. Each section contains a series of lines for text entry. There are also checkboxes and a section for 'Comments'. The form is titled 'Request Form' and 'Policy'.

## Using Training - Michigan

Please describe the accommodation (exception to our usual rule or policy) or modification that you are requesting. *If requesting a Service Animal, please include the breed, weight, color and name of the Animal and the nature of the accommodation requested (i.e. pet deposit, weight, breed restriction)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance in most peoples' daily lives, such as seeing, hearing, speaking, walking, breathing, working, thinking, or caring for oneself.

Do you consider yourself to be disabled as defined above? Yes ☐ No ☐ Not Sure ☐

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Accepting Requests

- ☑ **Don't ignore requests if they aren't in writing**
  - If a Resident makes a verbal request but refuses to complete the form, the CD should complete the form based on the information provided and make the following note on the form "Resident made verbal request but declined to complete the form. Information above based on conversation with Resident on \_\_\_\_\_" and initial the form.
- ☑ **Don't ignore requests made by someone other than a resident – a friend, family member or PHA can make a request**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## The Request

Please describe how the requested accommodation or modification is necessary for your use and enjoyment of your apartment or the community.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide the contact information for a third party verifier to whom we will send the attached Reasonable Accommodations/Modifications Verification form if necessary.

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City/ST/Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Resident Signature

Date

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## air Housing Training - Michigan

**Finalizing the Form**

-  In the "Office Use Only" section of the form, the CD will sign and date the form, enter the date the request was submitted to the Compliance Dept and the Senior Analyst's name. Fax or email the completed form to the Community's Senior Analyst as soon as possible but no more than 72 hours (three days) after the request was received. If Community Director is unavailable, contact the next level supervisor for assistance.

**Office Use Only**

Community Director Signature: _____	Date Received: _____
Date Request Submitted to Compliance: _____	Analyst Name: _____
Approved: _____ Denied: _____	Date Approved/Denied and Signed Below: _____
Signature of Person Approving/Denying Request: _____	
Reason for Denial: _____	
Date Resident Notified: _____	How was notification made? _____

**Don't forget the Transmittal!****Reasonable Accommodation / Modification Transmittal Form**

Request Sent To: _____	Senior Analyst: _____	REQUEST MUST BE SCANNED TO THE SENIOR ANALYST'S EMAIL OR FAXED TO THEIR DESK. IF FAX IS CHAOS & CORRECT FAX, FAX TO THE SENIOR ANALYST.
Fax #: _____	Community: _____	
Resident Name: _____	Resident Address: _____	

To establish that the request is due to a disability and subsequently document the correlation between the disability & the request. Please answer the following information to the best of your ability.

Does the resident / applicant have an obvious or otherwise known disability (such as a wheel chair, walker, visual impairment, etc.)? ☐ Yes ☐ No

**PARKING**

If the request is for parking does the resident need a full-Handicap (HC) accessible parking space, ramp, or parking loading bar and curb cut? ☐ Reserved HC parking space w/ striping, loading bar and curb cut ☐ Reserved parking space closer to apt

**Reserved Full Accessible Handicap Parking Spaces (Only)**

If a reserved full accessible HC parking space is requested send pictures of the parking area, including all "accessible" spaces, the area in which the space is being requested and a full length picture of the building & parking area.

**Don't forget the Transmittal!****SERVICE / COMPANION ANIMAL**

Breed: _____	Weight: _____	Color: _____	Name: _____
Breed: _____	Weight: _____	Color: _____	Name: _____

Does the community allow pets, if yes define:

Nature of request: \_\_\_\_\_

**GENERAL INFORMATION**

Ensure the resident / applicant completed the request form being as specific as possible, including contact info for the third party verifier. Check that the form was signed / dated by resident.

If the request was verbal (refused to complete the form, CD is to complete the form based on the information provided and use the form "Resident request input not defined to complete the form. Information given based on interview with Resident at \_\_\_\_\_ and attach the form.

The top section only of the Reasonable Accommodation / Modification Verification form should be completed & signed by the resident. Do not send the verification form to the third party verifier and instructed to do so by the Senior Analyst reviewing the request.

COMMENTS: \_\_\_\_\_


ALL REQUESTS ARE SUBJECT TO APPROVAL BY THE SENIOR ANALYST. REQUESTS ARE TO BE HANDLED BY THE COMPLAINTS DEPARTMENT. COMPLAINTS DEPARTMENT WILL REVIEW THE REQUEST & DETERMINE IF IT IS A REASONABLE REQUEST. IF NOT, THE SENIOR ANALYST WILL CONTACT THE RESIDENT FOR ASSISTANCE.

COMMUNITY DIRECTOR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## Fair Housing Training - Michigan

**Verifying Disability**

 **If disability and need for accommodation or modification is obvious or known, verification not needed**

 **If not, verify**

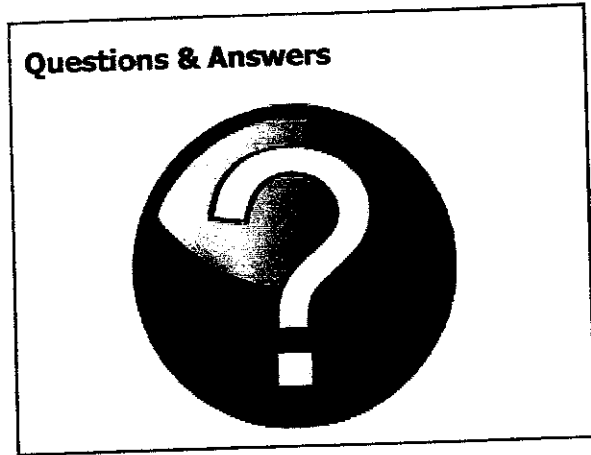
- **Medical professional – does NOT have to be an MD – could be nurse, physician's assistant, therapist, etc.**
- **In writing**
- **Don't accept letters or notes**



TO: (Firm Name, Address, Phone No., and Fax No. of Verifier)		<b>RETURN THIS FORM BY FAX OR MAIL TO:</b>	
Phone Number: _____ Fax Number: _____ RE: _____ Employee/Applicant Resident Name _____		Community Name: _____ Community Address: _____ Phone Number: _____ Fax Number: _____	
I, _____, provide reasonable accommodations and modifications for our residents with disabilities who have a verifiable need for such accommodations and modifications. A reasonable accommodation is an exception made to the usual rules or policies that is made necessary because of a disability for the resident to use and enjoy an apartment community. A reasonable modification is the physical alteration of the resident's apartment home or a common area space made necessary because of a disability. Our resident has authorized you to provide the information requested on this form.			
Resident's Name & Address: _____ Specific Accommodation or Modification Requested: _____ _____ _____			
Signature of Resident: _____ <i>This signature authorizes the verifier to provide answers to the questions below in the best of his/her knowledge of this resident.</i>			

1. Is this resident disabled as defined by the Fair Housing Act? ____ Yes ____ No ____ I Don't Know	
<i>The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance in most peoples' daily lives.</i>	
2. Please describe in what manner this disability restricts the resident in activities that are of central importance to his or her daily life: _____ _____ _____	
3. Does this resident need the accommodation/modification requested above to be able to live in his/her apartment community? ____ Yes ____ No	
4. If yes, please describe how this accommodation will enable the resident to use or enjoy this apartment community: _____ _____ _____	
5. If necessary will you be willing to testify in a court of law concerning the information provide in this form? ____ Yes ____ No	
Signature of Verifier: _____ Printed Verifier Name: _____ Address: _____	Date: _____ Title: _____ Phone: _____

## Fair Housing Training - Michigan



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Memo to File

File Name: Robison, Margaret Ann v. Meadowood Park Apartments

HUD Case # 05-14-0056-8

Date: 11/13/2013

Subject: Interview: Kelly Zeisloft

Respondent's representative states that the property receives no direct federal assistance, that the property has provided some tax credits. She states that they were prevented from posting a blue handicapped parking space designation as the parking space did not meet the accessibility guidelines.

For that reason the signs that they had posted were removed and replaced with a reserved sign for the tenant. She states that management has offered to Complainant a nearby accessible parking space which is about thirty feet further from her space, but Complainant declined the space.

Zysoff states that the property has met the accessibility requirements with 2% of the parking spaces meeting the accessibility requirements. She states that Complainant states that she needs a ramp, but that has not been documented by a medical professional. She states that management has tried to accommodate the requests of Complainant and have responded to her. If the office is opened Complainant has been informed to provide staff with notice that someone is in her parking space and that a tow company will be notified and the car removed. If the office is not opened she has been informed to contact maintenance and they will make arrangements to have the car moved. She states that Complainant wants the ability to have the person in her spot ticketed and towed by the police. The issue would become that any person with a handicapped permit would be allowed to park in her space.

Complainant wants the ability to call the police and have the person that is in her spot ticketed and towed.

Zysoff states that the cost of the curb cut ranges from \$1,000 to \$1,600 depending on the season. She states that her contact number is 810 210 6592.





**Exhibit C**

Disabled Renters' Housing Rights - Fair Housing Amendments Act  
42 U.S. Code SS3601-3619,3631.

Discriminatory Questions Not Allowed – Landlords are not allowed to question applicants about a disability or illness, or to seek medical records.

Wixom Grand River Associates L.P. Requests for my medical records from Dr. Robert Shaner, and Dr. Sean Coyle M.D.

Kelly Zeisloft letter dated November 13, 2013 requesting medical records.



## Disabled Renters' Housing Rights

**If you have a disability, you should understand the laws when you rent a house or apartment.**

Disabled people have significant protections when they rent living space. First, when you are seeking a rental, landlords are not allowed to ask whether you have a disability or illness, or ask to see your medical records. After moving in, your landlord may have to provide you with accommodations, at the landlord's expense, and your landlord may have to allow you to make reasonable modifications to your living unit at your own expense.

### Who Is Considered Disabled?

The federal Fair Housing Act and Fair Housing Amendments Act (42 U.S. Code §§ 3601-3619, 3631) prohibit discrimination against people who:

- have a physical or mental disability that substantially limits one or more major life activities – including, but not limited to:
  - mobility impairments
  - hearing impairments
  - visual impairments
  - chronic alcoholism (if it is being addressed through a recovery program)
  - mental illness
  - HIV, AIDS, and AIDS-Related Complex, or
  - mental retardation
- have a history of such a disability, or
- are regarded by others as though they have such a disability.

### Discriminatory Questions Not Allowed

Landlords are not allowed to question applicants about a disability or illness, or ask to see medical records. Even if it is obvious that you are disabled – for example, you use a wheelchair or wear a hearing aid – it is nevertheless illegal to inquire how severely you are disabled.

The policy behind this rule is simple: No matter how well-intentioned, the landlord cannot make decisions about where and how you will live on the property that he would not make were you not disabled. For example, if there are two units for rent – one on the ground floor and one three stories up – the landlord must show both units to an applicant who uses a wheelchair, however reasonable he thinks it would be for the person to consider only the ground floor unit.

### Mental or Emotional Impairments

If you had, or have mental or emotional impairments that make you disabled, or if you appear to have them, you must be evaluated by the landlord on the basis of your financial stability and history as a tenant, not on the basis of your mental health. A landlord may reject you only if he can point to specific instances of past behavior that would make you dangerous to others (such as information from a previous landlord that you repeatedly threatened or assaulted other residents). If you cannot meet the good-tenant criteria that the landlord applies to all applicants (such as a minimum rent-to-income ratio), you may be rejected on that basis, though landlords must consider a proffered cosigner if you are otherwise qualified for the rental but for your income.



November 25<sup>th</sup>, 2013

Dr. Sean Coyle  
19335 Merriman Road  
Livonia, Michigan 48152

Attention: Dr. Coyle

RE: Request for Reasonable Accommodation  
Margaret A. Robison  
Meadowood Park Apartments

The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance in most peoples' daily lives, such as seeing, hearing, speaking, walking, breathing, working, thinking, or caring for oneself.

The above resident has requested a reserved parking space due to a disability; the community offers two different types of reserved parking:

- 1) A reserved parking space located as close as possible to the resident's apartment home which provides a shorter walking distance to the apartment home without a curb cut / ramp and access aisle?
- Or
- 2) A fully accessible reserved parking space that has a curb cut / ramp and access aisle that is located along an accessible path to the building in which the resident resides?

In order to ensure the resident receives the parking accommodation please indicated the following:




Is this resident disabled as defined by the Fair Housing Act? ☒ Yes ☐ No

If yes, what type of parking space would be needed to benefit the resident?

☒ Type 1 – Reserved parking space close to their apartment home.

☐ Type 2 – Reserved parking space with a curb cut /ramp and access aisle.

I hereby certify that the information above is true and correct. I understand that Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

Signature of Verifier: 	Date: 12/2/13
Printed Verifier Name: Sean P. Coyle, M.D.	Title: _____
Address: New Horizons Medical Center PC 19335 Merriman Road Livonia, MI 48152 248-474-4900	
	

21800 Haggerty Road, Suite 220, Northville, MI 48167  
Phone: 248-344-3749 Fax: 248-344-3749 www.concordmgt.com

SCANNED

12-03-13  
JMC



PROPERTY STAMP

# REASONABLE ACCOMMODATIONS/MODIFICATIONS VERIFICATION FORM

TO: (Firm/Name, Address, Phone No., and Fax No. of Verifier)

Sean Coyle MD  
19335 MERRIMAN RD  
LIVONIA MI 48152  
 Phone Number: 248-474-4900  
 Fax Number: 248-474-3278

RETURN THIS FORM BY FAX OR MAIL

TO:

Community Name: MEADOWOOD PARK  
 Community Address: 27059 MEADOWOOD  
WILKINSON MI 48393  
 Phone Number: 248-344-7123  
 Fax Number: 248-344-7187

RE: MARGARET A. ROBISON

Employee/Applicant/Resident Name

MEADOWOOD PARK provides reasonable accommodations and modifications for our residents with disabilities who have a verifiable need for such accommodations and modifications. A reasonable accommodation is an exception made to the usual rules or policies that is made necessary because of a disability for the resident to use and enjoy an apartment community. A reasonable modification is the physical alteration of the resident's apartment home or a common area space made necessary because of a disability. Our resident has authorized you to provide the information requested on this form.

Resident's Name & Address: MARGARET A. ROBISON 27084 MEADOWOOD DR #103  
WILKINSON MI 48393Specific Accommodation or Modification Requested: RESIDENT HANDICAPPED SIGN FOR

Resident only w/ permit number curb cut out Has limped  
space according to disability guidelines

Signature of Resident: Margaret A. Robison  
 This signature authorizes the verifier to provide answers to the questions below to the best of his/her knowledge of this resident.

1. The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance in most peoples' daily lives.

Is this resident disabled as defined by the Fair Housing Act? ☒ Yes ☐ No

If yes, please complete the section below; if no, please skip to question 2.

I certify that Margaret Robison has a disability which meets the definition above. I verify that this request is directly related to his/her disability and is necessary to afford him/her the opportunity to access housing, maintain housing, or fully use/enjoy housing. (Necessary indicates necessity as opposed to only the matter of convenience or preference).

Please describe how the accommodation/modification is necessary and how the request relates to the disability:

significantly w/ walking due to neuropathy

2. Are you willing to testify in a court of law concerning the information provided above? ☒ Yes ☐ No

I hereby certify that the information above is true and correct. I understand that Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

Signature of Verifier: Sean P. Coyle, M.D.Printed Verifier Name: Sean P. Coyle, M.D.Address: 19335 Merriman RoadDate: 11-25-13Title: New Horizons Medical Center PCPhone: 248-474-4900

REASONABLE ACCOMMODATIONS/MODIFICATIONS VERIFICATION FORMS ARE NOT TO BE  
HAND CARRIED - PLEASE RETURN THIS FORM TO THE COMMUNITY LISTED ABOVE BY MAIL OR FAX



PROPERTY STAMP

# REASONABLE ACCOMMODATIONS/MODIFICATIONS VERIFICATION FORM

TO: (Firm/Name, Address, Phone No., and Fax No. of Verifier)

DR. ROBERT SHANER  
10985 MIDDLEBELT RD  
WILKINSON, ME 04830

Phone Number: 734-427-3550Fax Number: 734-422-5567

RE: MARGARET A. ROBISON  
Employee/Applicant/Resident Name

RETURN THIS FORM BY FAX OR MAIL TO:

Community Name:

MEADOWOOD PARK

Community Address:

27054 MEADOWOODWILKINSON, ME 04830Phone Number: 208-544-7123Fax Number: 208-544-7187

MEADOWOOD PARK provides reasonable accommodations and modifications for our residents with disabilities who have a verifiable need for such accommodations and modifications. A reasonable accommodation is an exception made to the usual rules or policies that is **made necessary because of a disability** for the resident to use and enjoy an apartment community. A reasonable modification is the physical alteration of the resident's apartment home or a common area space **made necessary because of a disability**. Our resident has authorized you to provide the information requested on this form.

Resident's Name & Address: MARGARET A. ROBISON 27054 MEADOWOOD DR #203Specific Accommodation or Modification Requested: RESIDENT HANDICAPPED RESIDENT

ONLY WITH PERMIT NUMBER ON - CURRENT ONE HANDICAPPED  
PARKING SPACE

Signature of Resident: MARGARET A. ROBISON

*This signature authorizes the verifier to provide answers to the questions below to the best of his/her knowledge of this resident.*

1. The Fair Housing Act defines disability as a physical or mental impairment that **substantially** limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an **impairment that prevents or severely restricts** the person from doing activities that are of central importance in most peoples' daily lives.

Is this resident disabled as defined by the Fair Housing Act? ☒ Yes ☐ No

If yes, please complete the section below; if no, please skip to question 2.

I certify that MARGARET ROBISON has a disability which meets the definition above. I verify that this request is directly related to his/her disability and is necessary to afford him/her the opportunity to access housing, maintain housing, or fully use/enjoy housing. (Necessary indicates necessity as opposed to only the matter of convenience or preference).

Please describe how the accommodation/modification is necessary and how the request relates to the disability:

THIS RESIDENT HAS A SPINAL CONDITION WHICH LIMITS HOW  
FAR SHE CAN WALK AND NEUROPATHY WHICH LIMITS HER ABILITY  
TO WALK. THESE CHANGES WILL GIVE HER THE FREEDOM TO GET  
TO AND FROM HER AUTOMOBILE AND HER APARTMENT

2. Are you willing to testify in a court of law concerning the information provided above? ☒ Yes ☐ No

I hereby certify that the information above is true and correct. I understand that Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

Signature of Verifier: DR. ROBERT SHANERDate: 12-4-13Printed Verifier Name: ROBERT M SHANER D.O.Title: D.O.Address: 10985 MIDDLEBELTPhone: 734 427 3550

REASONABLE ACCOMMODATIONS/MODIFICATIONS VERIFICATION FORMS ARE **NOT** TO BE  
HAND CARRIED - PLEASE RETURN THIS FORM TO THE COMMUNITY LISTED ABOVE BY MAIL OR  
FAX







November 25<sup>th</sup>, 2013

Dr. Robert Shaner  
10985 Middlebelt Road  
Livonia Michigan 48150

Attention: Dr. Shaner

RE: Request for Reasonable Accommodation  
Margaret A. Robison  
Meadowood Park Apartments

The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance in most peoples' daily lives, such as seeing, hearing, speaking, walking, breathing, working, thinking, or caring for oneself.

The above resident has requested a reserved parking space due to a disability; the community offers two different types of reserved parking:

- 1) A reserved parking space located as close as possible to the resident's apartment home which provides a shorter walking distance to the apartment home without a curb cut / ramp and access aisle?  
Or
- 2) A fully accessible reserved parking space that has a curb cut / ramp and access aisle that is located along an accessible path to the building in which the resident resides?

In order to ensure the resident receives the parking accommodation please indicated the following:



Is this resident disabled as defined by the Fair Housing Act? ☒ Yes ☐ No

If yes, what type of parking space would be needed to benefit the resident?

☐ Type 1 – Reserved parking space close to their apartment home.

☒ Type 2 – Reserved parking space with a curb cut /ramp and access aisle.

*I hereby certify that the information above is true and correct. I understand that Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.*

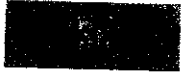
Signature of Verifier: <u>[Signature]</u>	Date: <u>12-4-13</u>
Printed Verifier Name: <u>ROBERT M SHANER D.C.</u>	Title: <u>DR. P. A. ROBINSON</u>
Address: <u>10985 MIDDLEBELT</u>	Phone: <u>734 427 3550</u>
	

21800 Haggerty Road, Suite 220 • Northville, MI 48167

Phone: 248.344.2598 • Fax: 248.344.2749 • www.concordrents.com

Today September 7, 2013 at 3:35p.m. I came home to my apartment and your moving truck was parked in my reserved space. These reserved spaces are for handicapped people. I asked them to move their truck and they said "no, can't you wait." I said no that this space is for the handicapped. He was mad that I asked him to move the truck. I went to the office and got the girl that works in the office and she said to call the police. I told her she needs to come over and make them move. I was on the phone with the police when they finally backed up their truck to an empty space. Then they started with their talk about the reason the people were moving out was because of me and the one started to point his finger at me. The complex had a problem with these tenants when they moved in because North American Van Lines also parked in my reserved spot. One of the men said go ahead and call the police because it will take them to long to come to complex and then he would be gone (that was the older guy). The younger men started saying where's my husband? why don't you have one? Then when I was walking into my apartment and started to close the door,

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Don't let the police let you in the ass.  
I am 40 year old Disabled Women  
& no one should talk to me like this.  
I told them I currently have a  
Complaint w/ the U.S. Attorney General  
& the older man said. I have been  
doing this for a long time & I know  
the U.S. Marshalls & that I was wrong.  
The tenants that they are moving out  
was 27084 NW Dr #204 Wixom @ MidAppts.  
The older man said he couldn't move the truck  
where there was grass because he would get his  
feet wet.



Memo to File

File Name: Robison, Margaret Ann v. Meadowood Park Apartments

HUD Case # 05-14-0056-8

Date: 11/13/2013

Subject: Interview: Kelly Zeisloft

Respondent's representative states that the property receives no direct federal assistance, that the property has provided some tax credits. She states that they were prevented from posting a blue handicapped parking space designation as the parking space did not meet the accessibility guidelines.

For that reason the signs that they had posted were removed and replaced with a reserved sign for the tenant. She states that management has offered to Complainant a nearby accessible parking space which is about thirty feet further from her space, but Complainant declined the space.

Zysoff states that the property has met the accessibility requirements with 2% of the parking spaces meeting the accessibility requirements. She states that Complainant states that she needs a ramp, but that has not been documented by a medical professional. She states that management has tried to accommodate the requests of Complainant and have responded to her. If the office is opened Complainant has been informed to provide staff with notice that someone is in her parking space and that a tow company will be notified and the car removed. If the office is not opened she has been informed to contact maintenance and they will make arrangements to have the car moved. She states that Complainant wants the ability to have the person in her spot ticketed and towed by the police. The issue would become that any person with a handicapped permit would be allowed to park in her space.

Complainant wants the ability to call the police and have the person that is in her spot ticketed and towed.

Zysoff states that the cost of the curb cut ranges from \$1,000 to \$1,600 depending on the season. She states that her contact number is 810 210 6592.

**Exhibit D**

Copy of original schematics of Meadowood Park Apartments.

Regulations on Handicapped Parking Spaces